

10/59659

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|---|--------------|--------------|
| TOTAL CLAIMS | | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | minus 20= | * |
| INDEPENDENT CLAIMS | minus 3= | * |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> | | |

SMALL ENTITY
TYPE ☐

OR OTHER THAN
SMALL ENTITY

| RATE | FEE | | RATE | FEE |
|-----------|-----|----|-----------|-----|
| BASIC FEE | | | BASIC FEE | |
| X\$ 25= | | OR | X\$50= | |
| X100= | | OR | X200= | |
| +180= | | OR | +360= | |
| TOTAL | | OR | TOTAL | |

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS FILED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 11 | Minus ** 20 | = 1 |
| Independent | 1 | Minus *** 3 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

SMALL ENTITY

OR OTHER THAN

| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 25= | | OR | X\$50= | |
| X100= | | OR | X200= | |
| +180= | | OR | +360= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | | Minus ** | = |
| Independent | | Minus *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 25= | | OR | X\$50= | |
| X100= | | OR | X200= | |
| +180= | | OR | +360= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | | Minus ** | = |
| Independent | | Minus *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 25= | | OR | X\$50= | |
| X100= | | OR | X200= | |
| +180= | | OR | +360= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.